

Barataria Preserve Education Center 6588 Barataria Blvd. Marrero, LA 70072 (504) 689.3690 ext. 25

Barataria Preserve Wetlands Explorers Camp 2015

Keep this page for your reference.

- Wetlands Explorers Camp accepts registrations on a first-come, first-served basis. There is a limit of 15 campers for this session.
- One application must be completed for <u>each</u> camper and signed by parent/guardian.
- All camp sessions are from 9:00 am through 2:00 pm.
- Applications will be accepted for <u>one</u> session <u>per camper</u> only.
- Camp may be paid for by cash or checks only. Check or money order should be made out to "Eastern National" and include Camp Session number and camper's name in the check memo section. Fees are not refundable and no partial payments are accepted.
- Completed applications must be returned to the Visitor Center with full payment to reserve spot.
- Children may only attend the camp for their age group, no exceptions can be made. The camper must be 12 years old by the first day of their camp session.
- Need-based scholarships for this age group are available. Please contact Ranger Stacy for more information.

Camp details:

- The Education Center is not open before 8:45 am or after 2:15 pm. Parents are responsible for dropping children off between and picking up on-time.
- In case of emergency, (i.e. late pick-up) parents should call numbers below to notify staff.
- Campers must bring a lunch and drink, snack, and a re-fillable water bottle or canteen.
- All campers must wear hiking boots or closed-toes sneakers.
- Campers should be in clothes that can get muddy and wet. Light-weight long pants are highly recommended as we will be walking off-trail.
- Parents should prepare campers with sunscreen and/or insect repellent prior to dropping off their children.
- Phone Numbers:
 - Ranger Stacy before June 2: (504) 689.3690 ext. 25
 - Ranger Stacy June 2-July 11 (504) 382.0294

Junior Camp Counselors Wanted!

If your 14 year old child has been to camp before at the Barataria Preserve and is interested in volunteering as Junior Camp Counselor for our 6-8 year old and 9-11 year old camps, please let Ranger Stacy know.



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2015 Wetlands Explorers Camp

Registration begins Saturday, March 28 at 9:30 am

July 7-11

Ages 6-10

Camp Fee: \$55.00

Camper Information

Camper's name:								
Age:	Male	Female	·	Rain Boot Size:			e:	
Please circle AD	ULT t-shirt size:	XS	S	M	L	XL	XXL	
	Parent/Gu	<u>uardian</u>	Inforn	nation				
Parent/Guardian name:								
Parent's Email address: _								_
Phone number (day):								
Emergency contact and p	hone:							
May we have permission	to use photograph	ıs of you	ır child	for can	np and p	ark pub	licity purpose	es?
Yes No ((Photo release is i	ncluded	with ap	plication	on)			
Jun	ior Camp Couns	selor: Pl	ease ch	ieck if i	<u>interest</u>	<u>ed</u>		
My 14 year old	child is interested contact us v	-	-			атр Соі	inselor. Plea	se
	Parent/0	<u>Guardia</u>	an Con	<u>sent</u>				
This is to certify that					has m	y permi	ssion to	
participate in all of the Na Lafitte National Historica	ational Park Servi	ce spons	sored Ju	ınior Ra	anger Ca	amp acti	vities at Jean	
Signature of parent/guardia	an					Date		
For Official Use Only	y Range	r's initial	s receiv	ing pap	erwork:		· · · · · · · · · · · · · · · ·	
Date Payment received: _	Payment	amount:	:	Pay	ment ty	pe:	CheckCas	sh



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Medical Information

Does your child have any of the following:						
Allergies	Yes No					
Significant medical or behavioral problems	Yes No					
Is your child taking any medications?Yes						
If you answered "yes" to any of the above questions, please use this space to allergies, or other medical problems.	clarify medications,					
Child's Primary medical provider:						
Address:						
Phone number:						
Emergency Care Consent						
In the event of illness or accident during my child's participation in Juniundersigned, hereby give consent to the National Park Service (NPS) to aid and/or administer emergency care and/or treatment through a clinic should the NPS deem it necessary. Additionally, I agree to pay the entire contingent upon emergency medical care and/or treatment for my child a under this consent. This agreement will continue as long as the participal Jean Lafitte National Historical Park and Preserve's Junior Ranger Care	provide emergency first /doctor or hospital e cost and fees as secured or authorized ant is registered for the					
Signature of parent/quardian	Date					
2.3						
How many times has your child attended camp at the Barataria Pre	serve?					
How did you hear about camp? Please check one: Attended camp before From a friend/family member						
Jean Lafitte NHP& Pres. websiteRanger at a Community EventFlyer at	the Barataria Preserve Visitor Center					



Park

Project

National Park Service Release Form

I hereby grant the National Park Service, or its authorized representatives and contractors, the right to make visual recordings, audio recordings, still images, and/or to otherwise capture material of me and any minor child under my control at the time the material is collected.

I hereby agree that the material will become the property of the National Park Service and will not be returned. As such, I agree that the National Park Service and its assigns have the right to reproduce, prepare derivative works of, distribute or display and use these materials in whole or in part, for government and non-government purposes, in any manner or media (whether now existing or created in the future), in perpetuity, and in all languages throughout the world. Use of this material shall include, but not be limited to, audiovisual programs; museum exhibits; websites; publications; product artwork; and project publicity. Additionally, I waive the right to inspect or approve any use of the material and any right to royalties or other compensation arising or related to the use of the material.

I hereby hold harmless and release and forever discharge the National Park Service from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am 18 years of age or older and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning and impact of this release. I agree to indemnify and hold the Government harmless for any and all losses, claims, expenses, suits, costs, demands and damages or liabilities on account of personal injury, death, or property damages of any nature whatsoever and by whomsoever made, arising out of the activities associated with the project in which I am taking part.

	Description of Material:	Perataria	Preserve	Summer	Camp	
	Signature/Date:	$-N_I$	4-			
111/20						
M11031	Address:					
11100	Printed Name Address: City: Phone (please include area		State:	Zip Code:		
	Phone (please include area	a code):				
	Organization/Group Name	(if applicable):	-NA-	(/)		
	If the person signing is under age 18, there must be consent by a parent or guardian, as follows: I hereby certify that I am the parent or guardian of					
	Parent or Guardian's Signa	ture/Date				
	Parent or Guardian's Printe	ed Signature				
	For NPS/Contractor Admin	istrative Use Only:				

Location

Privacy Act Statement: This information is provided to comply with the Privacy Act (PL 93-579). 5 U.S.C. 301 and 7 CFR 260 authorizing acceptance of the information requested on this form. The data you furnish will be used only to provide the National Park Service with contact information pertaining to this release

Date

Contractor

NPS COR